STATEMENT OF

FORM 1	ORGANIZ (See instruct			Office use only
1. NAME OF COMMITTEE (in	(Check if name full) is changed)	Example: If typying, typover the lines	ne 12FE4M5	
13th Colony L	eadership Committee, Inc.			
ADDRESS (number and	P. O. Box 114			
(Check if address is changed)				
	Savannah		GA	31402 -
		CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one	e-mail address)		
(Check if address is changed)	jryan@hancockask	ew.com		
				11111111
COMMITTEE'S WED	DACE ADDRESS (URL)			
	PAGE ADDRESS (URL)			
(Check if address is changed)				
2. DATE M N N N N N N N N N N N N N N N N N N	05 2002	C C00381384	-	
4. IS THIS STATEM		AMENDED	(A)	
I certify that I have exam Type or Print Name of	ned this Statement and to the best of my k Treasurer	-	rrect and complete	
Signature of Treasurer	Electronically Filed by Jennifer	L. Ryan	Date 0 8	1 1 4 7 2 0 0 9
NOTE: Submission of fa	lse, erroneous, or incomplete information m	nay subject the person signing the ATION SHOULD BE REPOR		
Office Use Only		For further inform Federal Election C Toll Free 800-424-	ommission 9530	FEC FORM 1 (Revised 02/2009)